Report Status: Validated

State of Wisconsin

Report Date:

April 30 2017

Department of Natural Resources

Questions:

ANGELA CAREY - WA/5

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2016 ANNUAL REPORT RECYCLING PROGRAM ACCOMPLISHMENTS AND ACTUAL COSTS

Form 4400-182

Rev. 1-17

NOTICE: Completion of this form fulfills the mandatory annual reporting requirement for continued approval of a responsible unit's recycling program and retention of the DNR recycling grant, for those who received it. This form is authorized by s. NR 544.10 and s. NR 542.09(3), Wis. Adm. Code. Personally identifiable information will be used for program administration and must be made available to requesters as required by Wisconsin Open Records law [s. 19.31-19.39, Wis. Stats].

Responsible Unit (RU)

County

**Municipal Code** 

**RU Population** 

City of Fitchburg

Dane

13225

27635

## **SECTION 1: CONTACT INFORMATION**

#### A. Authorized Representative

Name:

Horton, Cory

Title:

Director of Public Works

Address:

5520 Lacv Rd

Fitchburg, WI 53711-5318

Telephone: 608-270-4261

Phone Type:

Landline

Email:

cory.horton@fitchburgwi.gov

#### **B. Primary Contact**

Name:

Powell, Holly

Title:

Address:

5520 Lacy Rd

Fitchburg, WI 53711-5318

Telephone: 608-270-4263

Phone Type: Landline

Email:

holly.powell@fitchburgwi.gov

## **SECTION 2: EFFECTIVE PROGRAM INFORMATION**

A. Collection of Recyclables for 1 - 4 Residential Unit Housing	ng – Single Member
1. Do you have curbside collection?	
a) How is curbside service provided?	
RU contracts private hauler(s) to provide collection service	9
b) What is your primary curbside collection method?	Single Stream (all recyclables in one bin)
c) How often are recyclables picked up?	Once every other week
2. Do you have drop-off center(s)?	
a) How many total hours is your drop-off center(s) ope	n monthly, on average? 360
b) Who operates the drop off center(s)?	
RU operates drop-off site(s)	
4. Drop off site list	<b>电路的图形电影 医电路管电路电路</b>
Site Name Location or Address	City
Fitchburg Recycling Drop Off Site 2373 S. Fish Hatchery R	d Fitchburg
5. Do the majority of your residents use curbside or dro their recyclables?	p off collection for Curbside
6. Hauler List	
Hauler Name	Contract
PELLITTERI WASTE SYSTEMS INC 109	Municipality(RU)
B. Processing of Recyclables for 1-4 Residential Unit Housin	ng
1. List of Materials Recovery Facilities (MRF)	
Materials Recovery Facility	RU Contract
	001920 Y
2. List of Other Processors and End Users	
C. Compliance	
<ol> <li>A recycling ordinance is required by all RUs in accorded</li> <li>544.04(2), Wis. Adm. Code. What is your recycling ordinance</li> </ol>	ance with s. NR 41-34 dinance number?
<ul> <li>a) Did you make changes to your recycling ordinance in year?</li> </ul>	the previous calendar N
b) Ordinance Effective Date	en e
<ol> <li>A Compliance Assurance Plan (CAP) is required by all s. NR 544.04(9g), Wis. Adm. Code. Did you make char the previous calendar year?</li> </ol>	

3. How does your RU ensure compliance with your recycling ordinance at residences with 5 or more units?

RU staff respond to recycling-related complaints

4. How does your RU ensure compliance with your recycling ordinance at non-residential facilities and properties (e.g., businesses, stadiums, events, etc.)?

RU staff respond to recycling-related complaints

## **SECTION 3: ANNUAL PERFORMANCE INFORMATION**

#### A. Compliance & Enforcement

1. Compliance and enforcement actions taken

	Complaints Received	Warning Tags	Verbal Warnings	Written Warnings	Inspections	Citations
1 - 4 units residential	53	0	0	53		13
5+ units residential	0	0	0	0	0	0
Non-residential (Business)	2	0	0	0	2	2

#### B. Table 1 Materials and Weights Collected

1. Did your RU collect all of the required NR 544 Table 1 materials?

Y

#### 2. Tonnage of Recyclables Collected

Name	Туре	Tonnage
PELLITTERI WASTE SYSTEMS INC	HAUL	2200.44
Aluminum containers		19.15
Corrugated cardboard		651.66
Foam PS packaging		5.04
Glass containers		360.47
Newspaper		201.40
Plastic containers #1 & #2		86.78
Plastic containers #3 - #7		21.08
Residential mixed paper (includes magazines and off	ice paper	777.77
Steel & bi-metal containers		77.09
Loads Include:		

# 3. Summary of Compliance with Table 1 Collection Standard

a) Total weight of recyclables collected from residences	2,200.44
b) Per capita collection	159.25

## c) Per capita collection standard (lbs. per capita)

106.55

Based on the data you provided, you have MET your Table 1 collection standard.

## C. Information on Other Materials Collected From Residents

#### 1. Table 2 Other banned materials collected for recycling from residents

<b>Material Name</b>	Weight/	Unit
Electronics	13790	Pounds
Major appliances	54	Number of
Used oil	4415	Gallons
Used oil filters	1900	Pounds
Waste tires	20	Number of
Yard waste	1219	Tons

#### D. Report of Actual Recycling Costs

## Section 3.D will be blank if you did not have a grant award

#### 1. Summary of Costs

a) Total costs of recycling program (Worksheet Line 18, Column E)	463,193.00
b) Total ineligible costs and revenue (Worksheet Line 21, Column E)	2,980.00
c) Total eligible recycling costs (Worksheet Line 22, Column E)	460,213.00

You have successfully earned your grant. Repayment will not be required

d) Cost (including yard waste) per capita:

16.65

## 2. Yard Waste Costs and Summary

a) Enter the cost of handling yard waste that is included in line 18,	182,947.20
column E of the Acutal Costs worksheet.	

b) Cost (excluding yard waste) per capita:

10.03

c) Cost (excluding yard waste) per ton:

126.00

#### E. Outreach and Other Program Features

## 1. What outreach efforts did you undertake in the program year?

Direct mail (flyers in the tax bill, etc.)

News releases

Print ads (newspaper, magazines, etc.)

Printed publications (flyers, handouts, etc.)

Recycling focused event (collections, cleanups, etc.)

School education program (Green & Healthy Schools, etc.)

Social media (facebook, twitter, etc.)

Web site has recycling info (what to recycle, when, where, and how)

#### **SECTION 4: CERTIFICATION**

RU Name: City of Fitchburg Muni Code: 13225

Mail To: ANGELA CAREY - WA/5 County: Dane

PO Box 7921
Madison WI 53707-7921

Population: 27635

#### A. Summary of 2016 Recycling Performance

#### **Weight Summary**

Total weight of residential Table 1 materials collected 2,200.44

Per capita collection 159.25

Per capita collection standard 106.55

# Based on the data you provided, you have MET your Table 1 collection standard. Cost Summary

2016 Grant Award 98,461.88

Net eligible recycling costs 460,213.00
Cost per capita including yard waste 16.65

Yard waste handling costs 182,947.20
Cost per capita excluding yard waste 10.03

#### B. Exemption not required

#### C. Assurances

A. The responsible unit certifies the program operates in accordance with its Effective Recycling Program Approval or, if there have been changes, the responsible unit has described those changes in this 2016 Annual Report Form.

- B. The responsible unit agrees to comply with all applicable provisions of ch. 287, Wis. Stats., and chs. NR 544 and NR 542, Wis. Adm. Code.
- C. The responsible unit understands that if it fails to comply with any applicable provision of ch. 287, Wis. Stats., chs. NR 544 Wis. Adm. Code, and NR 542 Wis. Adm. Code, or its Effective Recycling Program Approval, the following may happen:
  - \* the responsible unit's Effective Recycling Program approval may be revoked,
  - \* the responsible unit may not be allowed to dispose of its solid waste in solid waste disposal and solid waste treatment facilities located in the state of Wisconsin, and
  - \* the responsible unit may lose its eligibility for a state recycling grant.
- D. The responsible unit certifies that in the management of its solid waste, it has, whenever possible and practical, followed these priorities: 1) the reduction of the amount of solid waste generated; 2) the reuse of solid waste; 3) the recovery of solid waste; 4) the composting of solid waste; 5) the recovery of energy from solid waste; 6) the land disposal of solid waste; and 7) the burning of solid waste without energy recovery.

I hereby acknowledge I am the duly authorized representative of the responsible unit and, to the best of my knowledge and belief, the information contained in this report is correct, true and complete.

#### D. Certification

## I have reviewed all sections of this report.

Name of Authorized Representative Signature of Authorized Representative Date Submitted

Cory Horton S/25/17

 Prepared by:
 Holly Powell
 Powell, Holly 608-270-4263 5520 Lacv Rd

**Confirmation #:** 147993-S-20170502:102320 Fitchburg, WI 53711-5318